



Hennepin County 2012

# Teen Parent Connection Report Card

*A teenager who becomes a parent faces significant educational, economic, social and emotional risks. While the overall number of teen parents is falling, these families continue to face challenges and barriers to achieving healthy outcomes for themselves and their children.*

Supporting Teen Parents			
<b>Goal 1</b>	<b>Goal 2</b>	<b>Goal 3</b>	<b>Goal 4</b>
Keep teen parents in school until graduation.	Connect teen parents with the support and services they need.	Reduce second pregnancies to teen parents during the teen years.	Provide quality early childhood education experiences for children of teen parents.

The Teen Parent Connection is a county-wide collaborative of over 60 representatives from government, schools and community-based agencies committed to identifying all teen parent families in Hennepin County and getting them connected to school or work, parenting support, and high quality early childcare services. These agencies work to provide comprehensive and coordinated evidence-based services for all pregnant and parenting teens and their children in Hennepin County, with the goal of helping them thrive and become successful, productive members of society. In order to achieve this vision, the City of Minneapolis and Hennepin County contracted with Teenwise Minnesota to provide leadership to the Teen Parent Connection and to work with its member agencies to develop recommendations for quality standards, systems improvements and service coordination.

## Number of Teen Parents

At the end of 2010, teen mothers (age 19 and younger) in Minneapolis headed an estimated 980 families with a total of 1,130 children. In Suburban Hennepin County teen mothers headed an estimated 800 families with a total of 920 children.<sup>1</sup>

**Challenge:** Most data presented in this report focuses on teen mothers and their children and excludes the fathers, largely because males are more difficult to identify and track, and because they are usually not the focus of services. However, it is important to develop systems and services that respond to the needs of teen fathers.

**Meet Mary** - At the age of 18, Mary became pregnant for the first time and enrolled in the Nurse-Family Partnership program. At that time, she had only two semesters remaining before she would graduate high school. Although they were nervous, Mary and the baby's father were eager to learn how to have a healthy pregnancy and how to become good parents. Shortly before Mary gave birth to a healthy baby, her mother, who had a history of mental and chemical health issues, relapsed, leaving Mary to pay for rent and other living expenses while still attending school. There were many times when Mary felt pressured to drop-out and find a job, but her nurse helped her connect to resources to sustain her until she graduated. The baby's father also found a job and was able to help with expenses. The nursing visits and support services continued after the birth of the child and encouraged the young couple to build their parenting skills and set goals for themselves, such as postponing another pregnancy until they were financially independent and had completed their education. With the help of support services, Mary was able to graduate high school on time and is now enrolled in a certificate program to further her education.



## Teen Parents Need Support to be Successful

### Goal 1

#### Keep teen parents in school until graduation.

Completing high school greatly increases future opportunities for families headed by teens and supports their ability to be self-sufficient.

### School Enrollment

In the 2010 - 2011 school year, Minneapolis Public Schools enrolled 586 pregnant and parenting teen girls. Intermediate School District 287 served 201 pregnant and parenting teen girls in 2011-2012.<sup>2-3</sup>

Number of female teen parents enrolled in school		
	Minneapolis Public Schools	School District 287
2008 - 09	621	242
2009 - 10	659	204
2010 - 11	586	201
2011 - 12	unavailable	223

**Challenge:** Schools are not required to collect data on pregnant or parenting students. Variability in reporting makes it difficult to accurately assess the number of teen parents enrolled in school and to track them if they leave one school and move to another.

### Goal 2

#### Connect teen parents with the support and services they need.

Teen parents face many challenges and may require support and services to meet the health and social needs of their family. Services can provide teens with essential health, social, and economic assistance to achieve healthier outcomes for themselves and their children.

### Public Health Nurse Home Visiting

Public health nurses from the Minnesota Visiting Nurse Agency (MVNA) provided support to 371 teen parents in Minneapolis and 235 teen parents in Suburban Hennepin County in 2011. Of teens seen by MVNA in Minneapolis in 2011, 81 percent received 3 or more visits (up from 64 percent in 2009). Of teens seen in Suburban Hennepin County in 2011, 79 percent received 3 or more visits (up from 67 percent in 2009). Visiting nurses help connect teen parents with community resources, provide education on parenting, and provide encouragement and resources so moms stay in school.<sup>4</sup>

#### Number of teen moms served by MVNA home visitors

*One or more visits*

	Minneapolis	Suburban Hennepin County
2009	638	260
2010	438	160
2011	371	235

**Challenge:** In early pregnancy, teenage girls are often reluctant to reveal their status and may not seek out or receive prenatal health care or other vital support services.

**Success:** Teens who receive home visits have healthier birth outcomes: 96 percent of teens who had 6 or more MVNA prenatal visits had babies with a healthy birth weight and 95 percent carried babies to full term (compared with 91 percent and 90 percent of all Minneapolis teen births, respectively).

### Intensive In-Home Support for Teen Moms

In addition to MVNA, Hennepin County contracts with other agencies to provide intensive home visiting to first time parents. In 2011, approximately 15 percent of families served included a parent under age 18.<sup>1</sup> Public health nurses and professional home visitors help teen parents learn about infant brain development, child development, parenting skills, and well-child care. Teen families receiving intensive home visiting have shown high rates of on-track development for their children, association with a medical home, and a very low rate of child maltreatment.<sup>5</sup>

### Public Assistance

In 2011, 1,072 Minneapolis teens and 933 teens in Suburban Hennepin County received public assistance. Of these teens, 62 percent received cash assistance and other benefits while 38 percent received non-cash assistance only (health care and food support).<sup>1</sup>

Number of teens receiving public assistance		
	Minneapolis	Suburban Hennepin County
2009	1291	1072
2010	1244	1022
2011	1072	933

**Challenge:** Some foreign-born teen parents may not be eligible for public assistance or other essential support services.

### Mobility of Teen Parents

During 2011, 56 percent of teen parents on public assistance reported at least two or more addresses.<sup>1</sup>

**Challenge:** It is difficult to track teen parents who are not receiving public assistance. Teen parents who are undocumented, not in school, or not receiving public assistance may be at higher risk for negative social, educational, health, and economic outcomes.



## Child Support

In 2011, 899 teen mothers were in the Hennepin County child support system. There was a father identified with 591 of these cases (58 percent). About 36 percent of these fathers were themselves teens, 59 percent were in their 20s, and the remaining 5 percent were 30 or older.<sup>6</sup>

## Emergency Assistance

In 2011, 227 (17 percent) of teen parents receiving public assistance utilized Emergency Assistance compared with 21 percent in 2010. The most common reasons for emergency assistance were emergency shelter, housing support, or utility payments.<sup>1</sup>

## Twin Cities Healthy Start

Twin Cities Healthy Start serves high-risk pregnant and parenting teens at clinics and social service sites in Minneapolis by providing case management to help reduce social and behavioral risk factors and infant mortality.<sup>7</sup>

### Number of Minneapolis females enrolled in Healthy Start

	Pregnant Teens	Parenting Teens
2009	152	52
2010	131	40
2011	100	39

## WIC Nutrition Program

Women, Infants, and Children (WIC) is a special supplemental nutrition program that safeguards the health of low-income pregnant, parenting, and breastfeeding women, infants, and children up to age 5 who are at nutritional risk. The program provides nutritious foods to supplement diets, information on healthy eating, breastfeeding promotion and support, and referrals to health services.<sup>1</sup>

### Number of teen moms enrolled in WIC

*Pregnant and parenting teens*

	Minneapolis	Suburban Hennepin County**
2009	1219	700
2010	950	535
2011	737	457

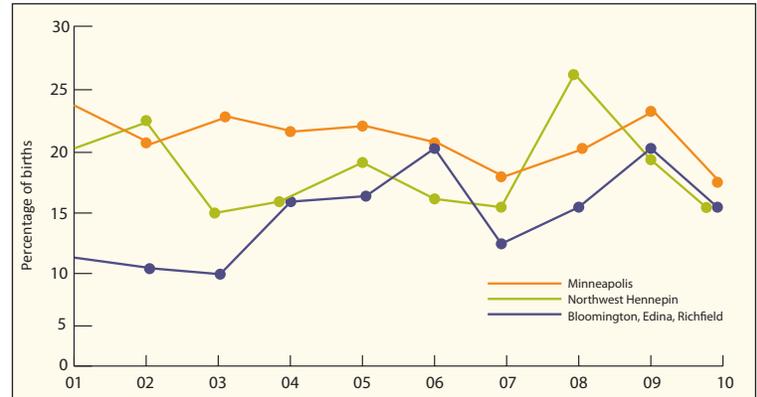
\*\*Does not include Bloomington, Edina, Richfield.

## Goal 3

### Reduce second pregnancies to teen parents during the teen years.

Second pregnancies to teen parents increase the risk for long-term poor outcomes for the teen, the child, and the family.

Percentage of births to teen mothers age 15 - 19 who were already mothers, 2001 - 2010



## Goal 4

### Provide quality early childhood education experiences for children of teen parents.

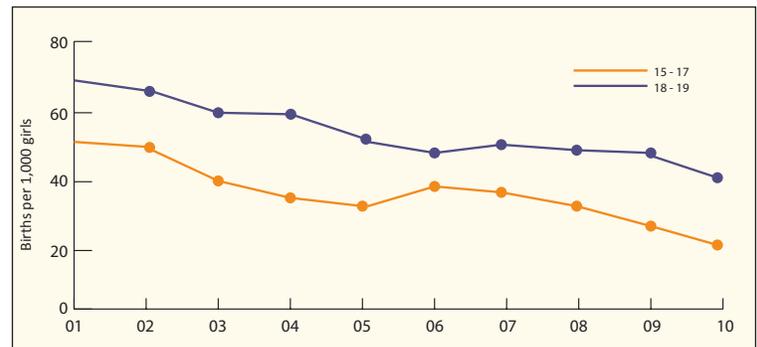
Early childhood education prepares children to enter school ready to learn and improves their chances for long-term school success. Furthermore, teen parents often need childcare to enable them to complete school or get a job.

## Child Care Assistance

In October 2011, 301 teen parents were on child care assistance. Of these teens, 51 percent were in Minneapolis and 49 percent were in Suburban Hennepin County.<sup>1</sup>

## Data on Teen Births

Minneapolis teen birth rate, 2001 - 2010



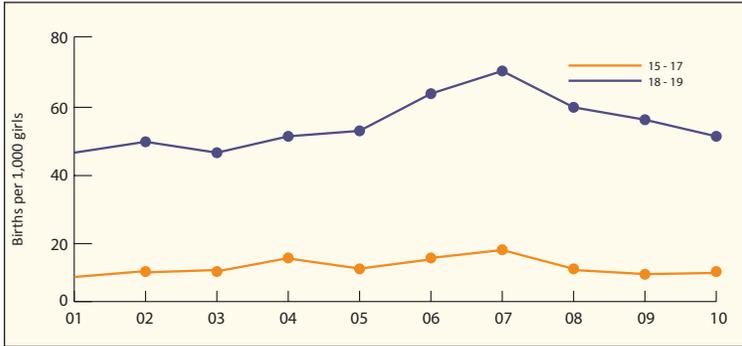
**Success:** The teen birth rate in Minneapolis for 15-17 year old girls decreased 45 percent from 2001 to 2010. The teen birth rate for 18-19 year old girls in Minneapolis decreased 43 percent.

### Data sources and citations

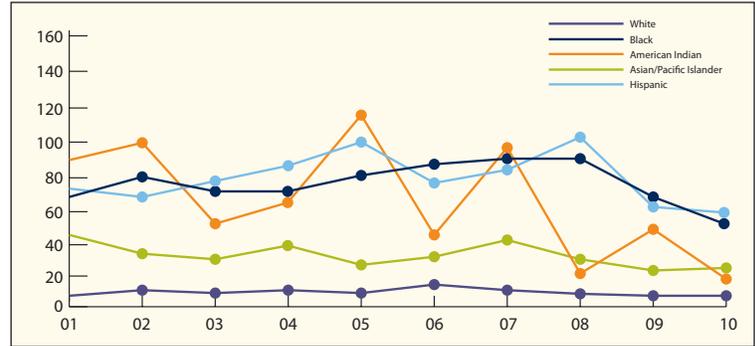
- Hennepin County Human Services and Public Health Department
- Minneapolis Public Schools
- Intermediate School District 287
- Minnesota Visiting Nurse Agency
- Valorose J, Chase R (2011). MVNA Minneapolis Teen Parent Program. Saint Paul, MN: Wilder Research
- Hennepin County Human Services and Public Health Department, Child Support Division
- Minneapolis Department of Health and Family Support



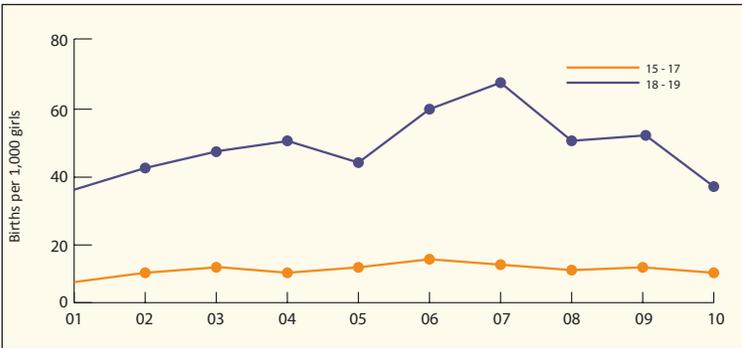
Northwest Hennepin County teen birth rate, 2001 - 2010



Suburban Hennepin County birth rates by race/ethnicity for girls 15 - 19, 2001 - 2010



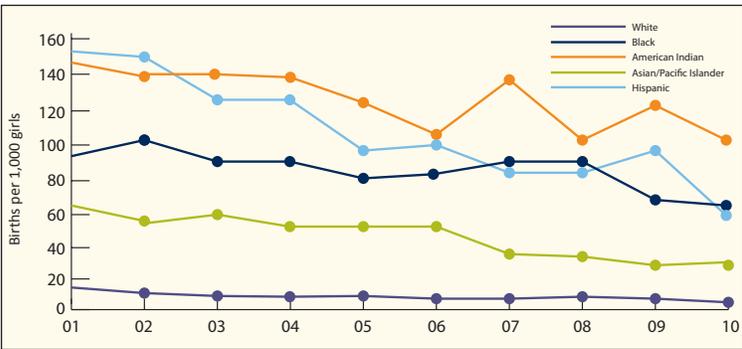
BER teen birth rate, 2001 - 2010



**Success:** Teen birth rates for Northwest Hennepin County and Bloomington, Edina, and Richfield decreased from 2007 through 2010 after rising earlier in the decade. The birth rates for girls age 15 - 17 in this area remain well below the rate in Minneapolis.

**Challenge:** The birth rates for girls age 18 - 19 in the suburban areas are comparable to Minneapolis for Bloomington, Edina, and Richfield and higher than Minneapolis for northwest suburban Hennepin County.

Minneapolis birth rates by race/ethnicity for girls 15 - 19, 2001 - 2010



**Challenge:** The highest teen pregnancy rate is seen among American Indians in Minneapolis. The next highest rates are among African Americans and Hispanics in both Minneapolis and Suburban Hennepin County.

Number of teen births per 1000 girls in 2010<sup>1,7</sup>

Area	Ages		Ages
	15-17	18-19	
<b>Northwest Hennepin Suburbs</b>	10.5	48.0	23.3
Brooklyn Center	24.7	80.0	46.7
Brooklyn Park	21.1	86.0	44.1
Champlin	3.1	24.0	9.6
Crystal	16.3	39.8	25.2
Golden Valley	0.0	39.4	11.0
Maple Grove	3.7	17.6	7.8
New Hope	25.7	58.3	37.8
Plymouth	4.3	19.4	8.4
Robbinsdale	13.5	73.8	34.9
<b>Southwest Hennepin Suburbs</b>	3.0	26.7	9.7
Eden Prairie	1.3	17.3	5.4
Hopkins	14.2	54.4	28.0
Minnetonka	2.0	7.7	3.5
St. Louis Park	3.6	54.6	21.2
<b>Southeast Hennepin Suburbs</b>	7.0	38.5	17.9
Bloomington	6.2	41.8	18.8
Edina	0.0	9.3	2.2
Richfield	24.3	59.0	38.4
<b>Minneapolis Communities</b>	25.8	40.4	34.1
Calhoun-Isles	6.6	20.9	12.1
Camden	42.6	118.6	71.4
Central	22.5	35.6	32.2
Longfellow	14.9	65.7	34.8
Near North	51.3	151.6	88.9
Nokomis	17.9	104.0	35.2
Northeast	35.9	92.5	59.5
Powderhorn	60.2	134.4	91.2
Phillips	58.4	132.0	92.4
Southwest	8.8	43.3	19.1
University	20.0	1.8	2.7

For more information about this report, please contact the Minneapolis Department of Health and Family Support at 612 673-2301.

This report is available online at: [www.minneapolismn.gov/health/reports](http://www.minneapolismn.gov/health/reports).

If you need this material in an alternative format please call Ahmed Muhumud at 612 673-2162 or email [Ahmed.Muhumud@minneapolismn.gov](mailto:Ahmed.Muhumud@minneapolismn.gov)

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